

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**510 EAST 12th , SUITE 1A****DES MOINES, IA 50319****Fax: (515)281-3701****www.iowa.gov/ethics**

Form

IND-EXP**INDEPENDENT EXPENDITURE
BY AN INDIVIDUAL OR
ORGANIZATION****For office use only**

Indexed _____

Audited _____

Checked _____

Computer _____

**INDEPENDENT EXPENDITURE
BY AN INDIVIDUAL OR PERMANENT ORGANIZATION WITHOUT PRIOR
APPROVAL OR COORDINATION WITH A CANDIDATE OR COMMITTEE**

Iowa Code section 68A.404 requires an individual or organization that expends in excess of \$750 in the aggregate to expressly advocate the nomination, election, or defeat of a candidate or the passage or defeat of a ballot issue to file a statement within 48 hours of the independent expenditure. This form is intended to serve those purposes.

ORGANIZATION OR INDIVIDUAL MAKING EXPENDITURE:

Name	
Mailing Address	City, State, Zip Code
Email Address (Optional)	Area Code & Telephone No.

CONTACT PERSON FOR THE ORGANIZATION, IF APPLICABLE:

Name	
Mailing Address	City, State, Zip
Email Address (Optional)	Area Code & Telephone Number

COMMITTEE BENEFITING FROM THE EXPENDITURE:

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2" style="height: 30px;">Name of Committee</td></tr> <tr> <td style="width: 60%;">Mailing Address</td> <td style="width: 40%;">City, State, Zip Code</td> </tr> <tr> <td>Email Address (if available)</td> <td>Area Code & Telephone Number</td> </tr> </table>	Name of Committee		Mailing Address	City, State, Zip Code	Email Address (if available)	Area Code & Telephone Number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Date of Expenditure</td> <td style="width: 40%;">\$ _____ Amount (fair market)</td> </tr> <tr> <td colspan="2" style="height: 30px;">Position of Communication (for or against candidate or ballot issue)</td> </tr> <tr> <td colspan="2" style="height: 30px;">Description of Communication</td> </tr> </table>	Date of Expenditure	\$ _____ Amount (fair market)	Position of Communication (for or against candidate or ballot issue)		Description of Communication	
Name of Committee													
Mailing Address	City, State, Zip Code												
Email Address (if available)	Area Code & Telephone Number												
Date of Expenditure	\$ _____ Amount (fair market)												
Position of Communication (for or against candidate or ballot issue)													
Description of Communication													

Criteria to use this form:

1. One or more independent expenditures in excess of \$750 in the aggregate to advocate for or against a candidate or ballot issue.
2. Expenditure was made without prior approval or coordination with a candidate, candidate's committee or ballot issue committee.
3. The individual or individuals making the expenditure are not a candidate, candidate's committee, or other committee.

THIS FORM MUST BE FILED WITHIN 48 HOURS OF THE EXPENDITURE. FOR THIS PURPOSE, "DATE OF THE EXPENDITURE" IS THE DATE THE COST IS INCURRED.

Persons making an independent expenditure shall also comply with the attribution requirement of Iowa Code section 68A.14.

Statement of Affirmation:

I, _____ affirm that the independent expenditure reported above is accurate. I also affirm that this expenditure was made without the prior approval or in coordination with the benefiting committee. I understand that by filing this form, I am subject to the campaign laws in Iowa Code chapter 68A and administrative rules in chapter 351. I also understand that the failure to timely file this form leads to the imposition of civil penalties and the intentional failure to file the form may lead to additional civil and criminal sanctions.

Signature_____
Date

INDEPENDENT EXPENDITURE BY AN INDIVIDUAL OR PERMANENT ORGANIZATION

Intent of form:

This form is intended to serve as a statement of independent expenditure by an individual or organization without prior approval or in coordination with the benefited committee. An independent expenditure is a communication that expressly advocates the nomination, election, or defeat of a clearly identified candidate or the passage or defeat of a clearly identified ballot issue.

Where to file:

Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Suite 1A
Des Moines, Iowa 50309
-or-
by fax: (515) 281-3701

When to file:

This form must be received in the Iowa Ethics and Campaign Disclosure Board office within 48 hours of the date the expenditure was incurred (the failure to timely file this form leads to the imposition of civil penalties and the intentional failure to file the form may lead to additional civil and criminal sanction).

Who to call if there are questions regarding this form

For all questions regarding the use of this form, please call the Iowa Ethics and Campaign Disclosure Board office at (515) 281-4028 or visit the Board's Web site at http://www.state.ia.us/ethics/campaigns/committee_info/independent_expenditure/index.htm.